

Best Available Copy

FORM PTO-447A
(Rev. 7-98)

Staple to face of Application

U.S. DEPARTMENT OF COMMERCE
PATENT & TRADEMARK OFFICE

APPLICATION TRANSFER REQUEST FOR

S.N. 09/38866

Section I. TRANSFER REQUEST BY (PRINT NAME)

RC JOHNSON

Date 8/23/00

TO: Art Unit 3533

Class/sub 433

FROM: A.U. 1775 Class 428

REASON:

Mill Blank & Dental prothesis

Gatekeeper concurrence Ref

Hand carried: Personally accepted by _____

Section II a. DISPOSITION BY RECEIVING TC

By: W. L. Son

A.U. 3732

Date 9/23/00

☐ ACCEPTED BY RECEIVING T.C.

NOT ACCEPTED

☒ Forward to receiving TC Post Classifier

☐ Non-classification issue/other, return to Originating TC/AU 1775

REASON:

Related to 09/441,577

Done by Lynne Miranda

Dentistry takes final products, not stock nor intermediate products
used by dentist in dental office

Section II b. DISPOSITION BY RECEIVING TC POST CLASSIFIER

☐ This dispute was resolved. Forward to TC/AU 3732 Class/Sub 433 Post Classifier T. Brown Date 4/23/00

Concurring 1 Date _____

☐ This dispute was not resolved, forward to DISPUTE RESOLUTION PANEL

Post Classifier Assessment:

Claims 40-49 are directed to the final product of a prothesis and controlling claims 33-35 are directed to a method of installing a prosthetic tooth. The blank claims may well be class 428 preforms. However, the I03 includes 2 refs. in class 433 directed to prothesis blanks. Appears restrictable

Gatekeeper Concurrence _____

Post Classifier _____

Date _____

Section III. DISPOSITION BY DISPUTE RESOLUTION PANEL

Date _____

Panel Decision:

Forward to Technology Center / Art Unit

Class/sub _____

REASON:

Panel Member _____

Concurring Panel Member _____

☐ This application MAY NOT be returned to the dispute resolution panel. THIS IS A FINAL DISPOSITION.

1700 INTERNAL TRANSFER REQUEST FOR S.N.:

09/383560

FROM (print name/AU):

L. Miranda

DATE:

8/00

FORWARD TO:

Art Unit:

3732

Class:

~~433~~ 433

Subclass:

REASON(S):

You had Parent S.N.:

See Specification page(s):

See Claims:

REASONS:

Claims drawn to a mill blank and dental prosthesis.

ACCEPTED BY (print name/AU):

DATE:

DECLINED BY (print name/AU):

DATE:

FORWARD TO:

Art Unit:

Class:

Subclass:

REASON(S):

You had Parent S.N.:

See Specification page(s):

See Claims:

REASONS:

ACCEPTED BY (print name/AU):

DATE:

DECLINED BY (print name/AU):

DATE:

FORWARD TO:

1709

1700 CLASSIFICATION UNIT

REASON(S):

See Specification page(s):

See Claims:

REASONS:

DISPOSITION BY 1700 CLASSIFICATION UNIT

FORWARD TO:

Art Unit:

Class:

Subclass:

REASON(S):

You had Parent S.N.:

See Specification page(s):

See Claims:

REASONS:

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BY CLASSIFIER (print name):

DATE: